

QUARTERLY STATEMENT

As of June 30, 2019

of the Condition and Affairs of the

APPALACHIAN INSURANCE COMPANY

NAIC Group Code0065,	0065	NAIC C
(Current Pe	riod) (Prior Period)	

Company Code..... 10316

Employer's ID Number..... 05-0284861

Organized under the Laws of RI

State of Domicile or Port of Entry RI

Country of Domicile US

Incorporated/Organized..... April 14, 1941

Commenced Business..... January 1, 1942

Statutory Home Office

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949 (City or Town, State, Country and Zip Code) (Street and Number)

Main Administrative Office

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949 (City or Town, State, Country and Zip Code) (Street and Number)

401-275-3000 (Area Code) (Telephone Number)

Mail Address

P.O. Box 7500 .. Johnston .. RI .. US .. 02919-0750

(Street and Number or P. O. Box)

(City or Town, State, Country and Zip Code)

401-275-3000

Primary Location of Books and Records

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949 (City or Town, State, Country and Zip Code) (Street and Number)

(Area Code) (Telephone Number)

Internet Web Site Address

www.fmglobal.com

401-415-1892

Statutory Statement Contact

Michael Gariglio

(Area Code) (Telephone Number) (Extension)

(Name)

michael.gariglio@fmglobal.com (E-Mail Address)

401-946-8306 (Fax Number)

OFFICERS

Name 1. Thomas Alan Lawson

Title Chairman & Chief Executive Officer Executive Vice President & Chief

2. Jonathan Irving Mishara 4. Denise Anastasia Hebert

Title Senior Vice President & Secretary Vice President & Treasurer

Financial Officer

OTHER

Bret Nils Ahnell Christopher Johnson Michael Robert Turner

3. Kevin Scott Ingram

Executive Vice President **Executive Vice President** Executive Vice President Malcolm Craig Roberts Sanjay Chawla Deanna Ruth Fidler

Executive Vice President Senior Vice President Senior Vice President

DIRECTORS OR TRUSTEES

Frank Thomas Connor Gracia Catherine Martore Michel Giannuzzi

Daniel Lee Knotts Christine Mary McCarthy Glenn Rodney Landau

Thomas Alan Lawson Stuart Blain Parker David Thomas Walton John Anderson Luke Jr Israel Ruiz

Rhode Island State of... County of..... Providence

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)			
Thomas Alan Lawson	Jonathan Irving Mishara	Kevin Scott Ingram			
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)			
Chairman & Chief Executive Officer	Senior Vice President & Secretary	Executive Vice President & Chief Financial Officer			
(Title)	(Title)	(Title)			
Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []			
This 9th day of August 2019	b. If no: 1. State the amendm	ent number			
John A. Soares III Notary Public	Date filed				
Expires July 5, 2021	Number of pages a	attached			

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY ASSETS

			Current Statement Date	4	
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds		70000	202,190,303	206,697,728
2.	Stocks:			202, 100,000	
	2.1 Preferred stocks	2,500,000		2,500,000	2,500,000
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens			0	
	3.2 Other than first liens			0	
4.	Real estate:				
	4.1 Properties occupied by the company (less \$0 encumbrances)			0	
	4.2 Properties held for the production of income (less \$0 encumbrances)			0	
	4.3 Properties held for sale (less \$0 encumbrances)			0	
5.	Cash (\$12,595,092), cash equivalents (\$36,826,777) and short-term investments (\$0)	49 421 869		49 421 869	53 920 949
6.	Contract loans (including \$0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets.				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	Ï			
13.	Title plants less \$0 charged off (for Title insurers only)				
14.	Investment income due and accrued				1,303,275
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection			18,587,667	18,153,849
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$0 earned but unbilled premiums)			0	
	15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0)			0	
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	, , , , ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	600,457
	16.2 Funds held by or deposited with reinsured companies			0	
	16.3 Other amounts receivable under reinsurance contracts				
	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon	2,449,338		2,449,338	4,530,289
18.2	Net deferred tax asset				79,000
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$0).				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$0) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets	0	0	0	0
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)				
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)		232,000	282,068,378	292,555,978
		OF WRITE-INS			
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)				
	Summary of remaining write-ins for Line 25 from overflow page				
2599	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	0	0	0	0

	LIADILITILO, OURI LOO ARD OTTILITY	1 1	2
		Current Statement Date	December 31 Prior Year
1.	Losses (current accident year \$0)		
2.	Reinsurance payable on paid losses and loss adjustment expenses		32,260,736
3.	Loss adjustment expenses		8.289.103
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0.		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated	,	
16.	Provision for reinsurance (including \$0 certified)	841,000	841,000
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	4,888,114	
20.	Derivatives		
21.	Payable for securities.		
22.	Payable for securities lending	4,987,913	3,658,170
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0.		
25.	Aggregate write-ins for liabilities		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	184,263,975	176,273,071
36.	Less treasury stock, at cost:		
	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
	Surplus as regards policyholders (Lines 29 to 35, less 36)		
38.	Totals (Page 2, Line 28, Col. 3)	282,068,378	292,555,978
2501	Miscellaneous Accounts Payable		120
	THIS COLUMN TO COLUMN TO GRANT TO THE STATE OF THE STATE		
	Summary of remaining write-ins for Line 25 from overflow page.		
1	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)		
2903.			
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)		
3203.			
	Summary of remaining write-ins for Line 32 from overflow page		
3299.	Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above)	0	0

UNDERWRITING INCOME 1.		STATEMENT OF INCO		_	
UNDERWITTING INCOME 1.1 Check 1.1 Check 1.2 Assumed (retiret 53941/19). 1.2 Assumed (retiret 53941/19). 1.3 Septiment 53941/19). 1.3 Septiment 53941/19). 1.4 Check 1.5 Che					
1. Pirestar services		LINDERWRITING INCOME		10 = 0.10	
1.1 Florest	1 Premium				
1.2 Assumed				44 233	44 233
1.3 Cardest (writers 5., 30,316,159) 1.4 Net. (writers 5., 30,316,159) 1.5 Cardest (w				,	
1.4 Met. (mittler S. 3,582 1879)			′ ′		
DEDUCTIONS 2. Losses incursing Current accident years \$0); 2.1 United. 2.2 Assurance. 3.1 7261,173 2.2 1233,224 3.7 1768,864 4. Ne. 3.1 17261,173 2.2 1233,224 4. Proposed. 3. Losse adjustment expenses incurred. 4. Other uniformiting operates recurred. 5. Losses incurred to united within global decidents. 5. Losses incurred to united within global decidents. 6. Co. 26,177 2. Response within the united within global decidents. 7. Losses and united within global decidents. 8. Losses adjustment expenses incurred. 8. Response within the united within global global to the united within global global global to the united within global glob					
2 1 Nover. 17.251 177 2 1233 224 73.078.034 2.2 Assumed 17.251 177 2 1233 224 73.078.034 2.3 Assumed 17.251 177 2 1233 224 2 1233 2 123			, ,	, ,	, ,
2.2 Assemed. 17,261,173 21,233,224 75,078,84 2.3 Cored. 17,251,173 21,233,224 75,078,84 2.4 Net. 17,251,173 1,245,224 75,078,84 2.4 Net. 17,251,173 1,245,224 75,078,84 2.5 Area (17,251,173 1,245,224 1,255,245 1,255,245 1,255,245 1,255,245 1,255,245 1,255,245 1,255,2					
2.4 fold. 2.4 hold. 3. loss significant expenses incurred. 3. loss significant expenses incurred. 4. 11113775 1.104-1000 2.2511772 2.1233222 2.73,078-8044 3. loss significant expenses incurred. 5. degregate efficients for architecturing expenses incurred. 5. degregate efficients for architecturing expenses incurred. 5. degregate efficients for architecturing expenses incurred. 6. degregate efficients for architecturing expenses incurred. 7. del formous of proceeded ords. 8. lest undersaring gan (less), life in must like 6 in the YI. 9. lest investment income example. 9. lest investment income example. 9. lest investment income example. 10. lett restance design laws (lesses) efficient gains law of \$5. (\$5.000). 11. lest investment gain (less), life in the \$5. (\$0.000). 12. lest gain or foosi from agents for permute behances changed off (lemon tensecone). 13. lest gain or foosi from agents for permute behances changed off (lemon tensecone). 14. degregate were for mocedimental ords. 15. lest come before dividends to policy fooders, after capital gains tax and before all other fadewal and foosi from a gent and the permute behances changed off (lemon tensecone). 16. lest income before dividends to policy fooders, after capital gains tax and before all other fadewal and foosign income taxes (Line 6 for miss Line 7). 17. loss comes to mocedimental to policy fooders, after capital gains tax and before all other fadewal and foosign income taxes (Line 6 for miss Line 7). 18. lest income alleria dividends by policyholders, after capital gains tax and before all other fadewal and foosign income taxes (Line 6 for miss Line 7). 19. loss comes to policyholders. 19. lest comes line 6 for miss Line 7). 19. loss comes gains (line 6 for miss Line 7). 19. loss comes gains (line 6 for miss Line 7). 19. loss comes gains (line 6 for miss Line 7). 19. loss comes gains (line 6 for miss Line 7). 19. loss comes gains (line 6 for miss Line 7). 20. loss gains (line 6 for miss Line 7). 21. loss comes gains (line 6 for miss Line 7). 22. loss					
2.4 Net	2.2 Assu	ımed	17,251,173 .	21,233,224	73,078,804
3. Ices adjustment expenses incread.					
4. Other underwriting operations incurred. 1.04.13.128					
\$ digregate white his for underwring declaridoms.					
6. Total underweiting deductions (Lines 2 through 5). 7. Net norm of protected cells. 7. Net norm of protected cells. 8. Net underweiting gain (loss) (Line 1 minus Line 6 + Line 7). 7. Sept. 139 9. Net investment norm earmed. 9. Net investment norm earmed. 9. Net investment gain (loss) (Line 9 + 10). 10. Net resides capital gains (losses) (Lines 9 + 10). 10. Net resides capital gains (losses) (Lines 9 + 10). 10. Net resides capital gains (losses) (Lines 9 + 10). 10. OTHER INCOME 12. Net gain or (loss) from agental or pramium balances charged off (loss) (loss					20,839,980
7. Net income of protected cells 1.	Aggrega	ate write-ins for underwriting deductions		0	
8. Net underwining pain (loss) (Line 1 minus Line 6 + Line 7)					
INVESTMENT INCOME 3,246 133 3,015,533 5,121,397 10. Not remaized copied grinin (soses) less capital grains tax of \$. (\$3,000) (198,690) 6,3774 (70,376) (70,37	Net inco	me of protected cells			
9. Not Investment income camend. 3,246,153 3, 3015538 5, 512,1297 1. 10. Net realized coping signs (loseos) less capital gains tax of \$.635,000) (198,990) 6,53,774 (70,376 1.) Not realized coping signs (loseos) less capital gains tax of \$.655,000) (198,990) 5,5374 (70,376 1.) Not realized coping signs (loseos) less capital gains tax of \$.600,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,0	8. Net und	erwriting gain (loss) (Line 1 minus Line 6 + Line 7)	7,056,139 .	(72,864)	(27,706,119)
9. Not Investment income camend. 3,246,153 3, 3015538 5, 512,1297 1. 10. Net realized coping signs (loseos) less capital gains tax of \$.635,000) (198,990) 6,53,774 (70,376 1.) Not realized coping signs (loseos) less capital gains tax of \$.655,000) (198,990) 5,5374 (70,376 1.) Not realized coping signs (loseos) less capital gains tax of \$.600,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,000,000 (198,990) 5,0		INVESTMENT INCOME			
10, Not realized capital gains (posse) less capital gains (as of S	9 Net invo		3 246 153	3 015 553	6 121 307
11. Net investment gain (loss) (these 9+ 10)					
Comparison Com	10. Net leal	izeu capital gains (losses) less capital gains lax of \$(55,000)	2 047 102	2 070 227	(10,010)
12. Net pain or (loss) from agents' or premium balances charged of (amount mouvered \$	I I. INELITIVE				0,000,321
Agricult recovered \$ _ 0 amount changed of \$ _ 0 0 0 0 0 0 0 0 0 0		OTHER INCOME			
Agricult recovered \$ _ 0 amount changed of \$ _ 0 0 0 0 0 0 0 0 0 0	12. Net gain	or (loss) from agents' or premium balances charged off			
13. Finance and service charges not included in premiums. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(amount	t recovered \$0 amount charged off \$0)			
15. Total other income (Lines 12 priough 14)	13. Finance	and service charges not included in premiums			
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 8 + 11 + 15) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 16 minus Line 17) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, beneficially as the capital gains tax and before all other federal and foreign income bases (Line 16 minus Line 17) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, beneficially as the capital gains tax and before all other federal and foreign income bases (Line 19) (loc line 20) 2,493,463 (17,109,228 2,433,463 (17,109	14. Aggrega	ate write-ins for miscellaneous income	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 8 + 11 + 15) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 16 minus Line 17) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, beneficially as the capital gains tax and before all other federal and foreign income bases (Line 16 minus Line 17) 1,010,332 3,006,463 (21,655,598 17. Dividends to policyholders, beneficially as the capital gains tax and before all other federal and foreign income bases (Line 19) (loc line 20) 2,493,463 (17,109,228 2,433,463 (17,109	15. Total oth	ner income (Lines 12 through 14)	0	0	0
To Dividents to policy/holders 11 + 15 15 10 10 103,322 3,006,463 2,21,655,598 18 Net income, after divididats to policy/holders, after capital gains tax and before all other federal and foreign income taxes (Lin 16 insulus Line 17) 10,103,332 3,006,463 (21,655,598 19 Federal and foreign income taxes (Lin 16 insulus Line 17) 10,103,332 3,006,463 (25,655,598 19 Federal and foreign income taxes incurred 2,133,951 583,000 (4,566,370 7,989,381 2,423,463 (4,566,370 7,989,381 2,423,463 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,9228 7,989,381 (1,710,928 7,989,38	16. Net inco	me before dividends to policyholders, after capital gains tax and before all other federal and			
17. Dividends to policyholders	foreign in	ncome taxes (Lines 8 + 11 + 15)	10,103,332	3,006,463	(21,655,598)
18. Not income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 16 minus Line 17).					
To region income taxes (line 16 minus Line 17). 10,103,32 3,006,463 (21,655,598) 1,650,000 4,645,637 1,000 4,0	18. Net inco	me, after dividends to policyholders, after capital gains tax and before all other federal and			
19. Federal and foreign income taxes incurred. 2.133.951 583.000 (4.546.37)	foreian i	ncome taxes (Line 16 minus Line 17)	10.103.332	3.006.463	(21.655.598)
20. Net income (Line 18 minus Line 19) (b Line 20). 7,969,381 2,423,463 (17,109,228)					
CAPITAL AND SURPLUS ACCOUNT 187,375,599 204,433,847					
21 Surplus as regards policyholders, December 31 prior year 187,375,599 204,433,847 204,433,847 27,969,381 2,423,463 (17,109,228 23. Net transfers (to) from Protected Cell accounts 7,969,381 2,423,463 (17,109,228 23. Net transfers (to) from Protected Cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transfers (to) from Protected Cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transfers (to) from Protected Cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transfer (to) from Protected Cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transferred income tax 7,969,381 2,423,463 (17,109,228 24. Net transferred from cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transferred from cell accounts 7,969,381 2,423,463 (17,109,228 24. Net transferred from transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred from Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,228 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,28 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,28 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,28 24. Net transferred to Cell accounts 7,969,381 2,423,463 (17,09,28 24. Net transferred to Cell accounts 7,969,381 2,423,483 (17,09,28 24. Net transferred to Cell accounts 2,423,483			,,,,,,	, , , , , ,	(, , - ,
22 Net harders (from Line 20)					
22. Net transfers (to) from Protected Cell accounts					
24. Change in net urrealized capital gains or (losses) less capital gains tax of \$. 5,000. 15,523 8,167 1,138 25. Change in net urrealized foreign exchange capital gain (loss). (40,000 16,000 16,000 34,000 27. Change in nonadmitted assets. (11,000 9,000 34,000 28. Change in provision for reinsurance. (15,000 9,000 34,000 29. Change in provision for reinsurance. (58,842 30,000 34,000 29. Change in surplus notes. (20,000 34,000 34,000 34,000 29. Change in surplus notes. (20,000 34,000			7,969,381 .	2,423,463	(17,109,228)
25. Change in net prealized foreign exchange capital gain (loss)					
26. Change in not deferred income tax.					1,138
27. Change in nonadmitted assets.					
28. Change in provision for reinsurance.	26. Change	in net deferred income tax	(11,000)	(15,000)	(40,000)
29					
30 Surplus (contributed to) withdrawn from protected cells.					55,842
31. Cumulative effect of changes in accounting principles.					
32. Capital changes: 32.1 Paid in. 32.2 Transferred from surplus (Stock Dividend). 32.3 Transferred to surplus. 33. Surplus adjustments: 33.1 Paid in. 33.2 Transferred to capital (Stock Dividend). 33.3 Transferred from capital (Stock Dividend). 33.4 Net remittances from or (to) Home Office. 35. Dividends to stockholders. 36. Change in treasury stock. 37. Aggregate write-ins for gains and losses in surplus. 38. Change in surplus as regards policyholders (Lines 22 through 37). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38). 30. On 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	30. Surplus	(contributed to) withdrawn from protected cells			
32.1 Paid in	31. Cumulat	tive effect of changes in accounting principles			
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Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY CASH FLOW

		1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
	CASH FROM OPERATIONS			
1.	Premiums collected net of reinsurance	35,398,001	33,447,976	67,900,593
2.	Net investment income	3,216,522	3,179,961	6,360,386
3.	Miscellaneous income			
4.	Total (Lines 1 through 3)	38,614,523	36,627,937	74,260,979
5.	Benefit and loss related payments		, ,	· · ·
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	11,599,520	12,518,510	24,714,010
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)			
10.	Total (Lines 5 through 9)			
11.	Net cash from operations (Line 4 minus Line 10)	(14,721,881)	(14,454,104)	(12,080,11
	CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	, ,		26,011,12
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	16,079	8,168	4,05
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	25,803,272	7,476,180	26,015,17
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	21,580,726		14,779,41
	13.2 Stocks			
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets			
	13.6 Miscellaneous applications		2,040,003	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	21,580,726	2,040,003	14,779,41
14.	Net increase or (decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	4,222,546	5,436,177	11,235,75
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			
	16.6 Other cash provided (applied)	6,000,255	(14,896,666)	(23,272,07
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	6,000,255	(14,896,666)	(23,272,07
RE	ECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(4,499,080)	(23,914,593)	(24,116,42
19.	Cash, cash equivalents and short-term investments:			. , ,
	19.1 Beginning of year	53,920,949	78,037,376	78,037.37
	19.2 End of period (Line 18 plus Line 19.1)			

Note 1 - Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices (required NAIC disclosure regardless of whether there is any significant change)

The accompanying financial statements of Appalachian Insurance Company ("Company") have been prepared on the basis of accounting practices prescribed or permitted by the Rhode Island Division of Insurance.

The state of Rhode Island requires insurance companies domiciled in the state of Rhode Island to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the Rhode Island Division of Insurance. The Company has no state prescribed or permitted practices.

		SSAP	F/S	F/S		
		#	Page	Line #	Current Year to Date	2018
NE	INCOME					
(1)	The Company state basis					
	(Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 7,969,381	\$ (17,109,228)
(2)	State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
					\$ -	\$ -
(3)	State Permitted Practice that are an increase/(decrease) from NAIC SAP					
(4)	NAIC SAP $(1-2-3=4)$	XXX	XXX	XXX	\$ 7,969,381	\$ (17,109,228)
SUF	RPLUS					
(5)	The Company state basis					
	(Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 195,366,503	\$ 187,375,599
(6)	State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
					\$ -	\$ -
(7)	State Permitted Practice that are an increase/(decrease) from NAIC SAP					
(8)	NAIC SAP $(5-6-7=8)$	XXX	XXX	XXX	\$ 195,366,503	\$ 187,375,599

B. Use of Estimates

No significant changes.

- C. Accounting Policy
 - (1) No significant changes.
 - (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method (required NAIC disclosure regardless of whether there is any significant change)

Non loan-backed bonds with NAIC designations 1 or 2 are stated at amortized cost using the interest method. Non loan-backed bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value. See paragraph 6 for loan-backed and structured securities.

(3) - (5)

No significant changes.

(6) Basis for Loan-Backed Securities and Adjustment Methodology (required NAIC disclosure regardless of whether there is any significant change)

U.S. government agency loan-backed and structured securities are valued at amortized value. Other loan-backed and structured securities are valued at either amortized value or fair value, depending on many factors including: type of underlying collateral, whether modeled by NAIC vendor, whether rated (by either NAIC approved rating organization or NAIC Securities Valuation Office), and relationship of amortized value to par value and amortized value to fair value.

(7) - (13)

No significant changes.

D. Going Concern (required NAIC disclosure regardless of whether there is any significant change)

Based upon its evaluation of relevant conditions and events, management has concluded that the Company will continue as a going concern.

Note 2 – Accounting Changes and Corrections of Errors

Not applicable.

Note 3 – Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

No significant changes.

B. Debt Restructuring

No significant changes.

C. Reverse Mortgages

No significant changes.

- D. Loan-Backed Securities (required NAIC disclosure regardless of whether there is any significant change)
 - (1) Description of Sources Used to Determine Prepayment Assumptions

Loan-backed bonds and structured securities are valued at amortized cost using the constant interest rate method, and using an effective yield based on current prepayment assumptions obtained from Bloomberg, rather than anticipated prepayments at the date of purchase. Prepayment assumptions are reviewed periodically and updated in response to changes in market interest rates.

(2) Securities with Recognized Other-Than-Temporary Impairment

Not applicable.

(3) Recognized OTTI securities

Not applicable.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.	The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ -
		2. 12 Months or Longer	\$ -
b.	The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ -
		2. 12 Months or Longer	\$ -

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered. These conclusions are supported by a detailed analysis of the underlying credit and cash flows of each security. Unrealized losses are primarily attributable to credit spread widening and increased liquidity discounts. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities, if future events, information and the passage of time causes it to conclude that declines in value are other-than temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) Policies Requiring Collateral

No significant changes.

(2) Collateral Pledged

No significant changes.

- (3) Collateral Received
 - a. Aggregate Amount of Cash Collateral Received

No significant changes.

The fair value of that collateral and of the portion of that collateral that it has sold or repledged (required NAIC disclosure regardless of whether there is any significant change)

\$ 4,987,913

c. Information About Sources and Uses of Collateral

No significant changes.

(4) Aggregate Value of the Reinvested Collateral

No significant changes.

- (5) Collateral Reinvestment
 - a. Aggregate Amount of Cash Collateral Reinvested

No significant changes.

Note 5 - Investments (continued from preceding page)

b. Explanation of Additional Sources of Liquidity for Maturity Date Mismatches

No significant changes.

(6) Detail on Collateral Transactions Not Permitted by Contract or Custom to Sell or Repledge

No significant changes.

(7) Collateral for Securities Lending Transactions that Extend Beyond One Year From the Reporting Date

No significant changes.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

J. Real Estate

Not applicable.

K. Low-Income Housing Tax Credits (LIHTC)

Not applicable.

L. Restricted Assets

No significant changes.

M. Working Capital Finance Investments (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

N. Offsetting and Netting of Assets and Liabilities (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

O. Structured Notes

Not applicable.

P. 5GI* Securities

Not applicable.

Q. Short Sales

Not applicable.

R. Prepayment Penalty and Acceleration Fees

No significant changes.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

Note 7 - Investment Income

No significant changes.

Note 8 - Derivative Instruments (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 9 - Income Taxes

No significant changes.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes.

Note 11 - Debt

A. Debt Including Capital Notes

Not applicable.

B. FHLB (Federal Home Loan Bank) Agreements (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

(1) - (3)

No significant changes.

(4) Components of Net Periodic Benefit Cost (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(5) - (21)

No significant changes.

B. Description of Investment Policies

Not applicable.

C. Fair Value of Plan Assets

Not applicable.

D. Rate of Return Assumptions

Not applicable.

E. Defined Contribution Plans

No significant changes.

F. Multiemployer Plans

Not applicable.

G. Consolidated/Holding Company Plans

No significant changes.

H. Postemployment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits

Not applicable.

Note 13 - Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

No significant changes.

Note 14 - Liabilities, Contingencies and Assessments

No significant changes.

Note 15 - Leases

No significant changes.

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant changes.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not applicable.

- B. Transfer and Servicing of Financial Assets
 - (1) Loaned Securities

No significant changes.

(2) Servicing Assets and Servicing Liabilities (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(3) Servicing Assets and Liabilities Subsequently Measured at Fair Value

Not applicable.

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(5) Transfers of Financial Assets Accounted for as Secured Borrowing

Not applicable.

(6) Transfers of Receivables with Recourse

Not applicable.

(7) Repurchase Agreements

Not applicable.

C. Wash Sales (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

Not applicable.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Note 20 – Fair Value Measurements (required NAIC disclosure regardless of whether there is any significant change)

- A. Fair Value Measurements
 - (1) Fair Value Measurements at Reporting Date

The Company categorizes its invested assets that are measured at fair value into the three-level fair value hierarchy or designates certain invested assets as carried at net asset value (NAV). Item 4 provides a discussion of each of these categories.

Description for Each Type of Asset or Liability Assets at Fair Value	Level 1	Level 2	Level 3	N	et Asset Value (NAV)	Total
Cash Equivalents	\$ -	\$ -	\$ -	\$	36,826,777	\$ 36,826,777
Total	\$ -	\$ -	\$ -	\$	36,826,777	\$ 36,826,777
Liabilities at Fair Value						
	\$ -	\$ -	\$ -	\$	-	\$ -
Total	\$ -	\$ -	\$ -	\$	-	\$ _

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

The Company has no assets measured at fair value in the Level 3 category.

(3) Policies when Transfers Between Levels are Recognized

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. The Company has no assets measured at fair value in the Level 3 category.

Note 20 - Fair Value Measurements (required NAIC disclosure regardless of whether there is any significant change) (continued from preceding page)

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

The valuation techniques required by the Fair Value Measurements guidance (SSAP 100) are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect market assumptions.

These two types of inputs create the following fair value hierarchy:

Level 1 Quoted prices for identical instruments in active markets

Level 2 Quoted prices for similar instruments in active markets; quoted prices for identical or similar instruments in markets that are not active; and model-derived valuations whose inputs are observable or whose significant value drivers are observable

Significant inputs to the valuation model are unobservable

The Company elects to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

The Company retains independent pricing vendors to assist in valuing invested assets when the prices are not available from the SVO.

When available, the Company uses quoted market prices to determine the fair value of investment securities, and they are included in Level 1.

When quoted market prices are unavailable, the Company uses quotes from independent pricing vendors based on recent trading activity and other relevant information, including market interest rate curves, referenced credit spreads and estimated prepayment rates, where applicable. These investments are included in Level 2 and are primarily comprised of fixed income securities which are NAIC rated 3 or below.

In infrequent circumstances, the pricing is not available from the pricing vendor and is based on significant unobservable inputs. In those circumstances, the investment security is classified in Level 3. There are no Level 3 investments at reporting date.

(5) Fair Value Disclosures

Not applicable.

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not applicable.

C. Fair Value Level

> The table below reflects the fair value and admitted values of all admitted assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy as described in Note 20A.

	Α	ggregate Fair						Ne	t Asset Value	N	ot Practicable
Type of Financial Instrument		Value	Ad	mitted Assets	(Level 1)	(Level 2)	(Level 3)		(NAV)	(C	arrying Value)
Bonds	\$	206,773,776	\$ 2	202,190,303	\$ -	\$ 202,190,303	\$ -	\$	-	\$	-
Cash, cash equivalents and											
short-term investments	\$	49,421,869	\$	49,421,869	\$ 12,595,092	\$ -	\$ -	\$	36,826,777	\$	-
Securities lending reinvested											
collateral assets	\$	4,987,913	\$	4,987,913	\$ 4,987,913	\$ -	\$ -	\$		\$	-
Total	\$	261,183,558	\$ 2	256,600,085	\$ 17,583,005	\$ 202,190,303	\$ -	\$	36,826,777	\$	-

D. Not Practicable to Estimate Fair Value

Not applicable.

E. **NAV Practical Expedient Investments**

> The Company elects to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

Note 21 - Other Items

Not applicable.

Note 22 - Events Subsequent

No significant changes.

Note 23 - Reinsurance

No significant changes.

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

A-E. Not applicable.

F. Risk Sharing Provisions of the Affordable Care Act (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses (required NAIC disclosure regardless of whether there is any significant change)

No significant changes.

Note 26 - Intercompany Pooling Arrangements

No significant changes.

Note 27 - Structured Settlements

Not applicable.

Note 28 - Health Care Receivables

Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

No significant changes.

Note 31 – High Deductibles

Not applicable.

Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not applicable.

Note 33 - Asbestos/Environmental Reserves

No significant changes.

Note 34 - Subscriber Savings Accounts

Not applicable.

Note 35 - Multiple Peril Crop Insurance

Not applicable.

Note 36 - Financial Guaranty Insurance

Financial Guarantee Insurance Contracts

Not applicable.

В. Schedule of Insured Financial Obligations at the End of the Period (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY **GENERAL INTERROGATORIES**

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclosure of as required by the Model Act?	Material Transactions with the State of Domicile,			Yes[]] No[X]
1.2	If yes, has the report been filed with the domiciliary state?				Yes [
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of reporting entity?	incorporation, or deed of settlement of the			Yes[]] No[X]
2.2	If yes, date of change:					
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or If yes, complete Schedule Y, Parts 1 and 1A.	more affiliated persons, one or more of which is an insur	er?		Yes [X	(] No[]
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end	1?			Yes[]] No [X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.					
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?				Yes[]] No[X]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the	e entity/group.				
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by If yes, complete and file the merger history data file with the NAIC for the annual filing correspondence.				Yes []] No[X]
4.2	If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state a result of the merger or consolidation.	abbreviation) for any entity that has ceased to exist as a				
	1			2 NAI		3
	Name of Entitle			Compa	any	State of
	Name of Entity			Cod	e	Domicile
5.	If the reporting entity is subject to a management agreement, including third-party administrator(similar agreement, have there been any significant changes regarding the terms of the agreement fyes, attach an explanation.		Y:	es[]	No []] N/A [X]
6.1	State as of what date the latest financial examination of the reporting entity was made or is being	g made.		12/	/31/2017	7
6.2		state of domicile or the reporting entity. This date			/31/2017	
6.3	State as of what date the latest financial examination report became available to other states or reporting entity. This is the release date or completion date of the examination report and not the	the public from either the state of domicile or the		12/	/08/2018	3
6.4	By what department or departments?	,				
	Rhode Island Division of Insurance					
6.5	Have all financial statement adjustments within the latest financial examination report been account with Departments?	ounted for in a subsequent financial statement filed	Ye	s[]	No[]	N/A [X]
6.6	Have all of the recommendations within the latest financial examination report been complied with	rith?	Ye	s[]	No []	N/A [X]
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corby any governmental entity during the reporting period?	rporate registration, if applicable) suspended or revoked			Yes[]] No[X]
7.2	If yes, give full information:					
8.1	Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Boa	ard?			Yes[]] No[X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.					
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?				Yes[]] No[X]
8.4	If the response to 8.3 is yes, please provide below the names and location (city and state of the regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's properties of the Comptroller Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's properties of the Corporation (FDIC) and the Securities Exchange Commission (SEC).	of the Currency (OCC), the Federal Deposit Insurance				
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting functions) of the reporting entity subject to a code of ethics, which includes the following standar				Yes [X	(] No[]
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of	of interest between personal and professional relationshi	ps;			
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to	to be filed by the reporting entity;				
	(c) Compliance with applicable governmental laws, rules and regulations;					
	(d) The prompt internal reporting of violations to an appropriate person or persons identified i	in the code; and				
	(e) Accountability for adherence to the code.					
9.11	If the response to 9.1 is No, please explain:					
9.2	Has the code of ethics for senior managers been amended?				Yes[]] No[X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).					

9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY **GENERAL INTERROGATORIES**

PART 1 - COMMON INTERROGATORIES

Yes[] No[X]

9.31	If the r	response to 9.3 is Yes, provide the nature of any waiver(s).					
			FINANCIAL				
10.1	Does	the reporting entity report any amounts due from parent, subsidiar	ries or affiliates on Page 2 of this sta	tement?			Yes[] No[X
		indicate any amounts receivable from parent included in the Pag	Ğ			\$	0
10.2	, 00,	malada arry amadina rocardo nom parone madada in ara r ag				<u>*</u>	
			INVESTMENT				
	use by	any of the stocks, bonds, or other assets of the reporting entity load another person? (Exclude securities under securities lending ag		nt, or otherwise	made available for		Yes[] No[X
11.2	If yes,	give full and complete information relating thereto:					
12.	Amou	nt of real estate and mortgages held in other invested assets in S	chedule BA:			\$	0
13.	Amou	nt of real estate and mortgages held in short-term investments:				\$	0
14.1	Does	the reporting entity have any investments in parent, subsidiaries a	and affiliates?				Yes [X] No [
	14.2	If yes, please complete the following:					
					1 ear End Book/Adjus		2 parter Book/Adjusted
	14.21	Bonds		\$	Carrying Value	0 \$	rrying Value 0
	14.22				2,500		2,500,000
	14.23 14.24					0	0
	14.25					0	0
	14.26		(alall bear 44 04 to 44 00)	•	0.500	0	0
	14.27 14.28	,	,	\$ \$	2,500	000 \$	2,500,000
15.1		e reporting entity entered into any hedging transactions reported		<u> </u>		_ <u> </u>	Yes[] No[X
15.2	If yes.	has a comprehensive description of the hedging program been m	made available to the domiciliary stat	e?			Yes[] No[
	-	attach a description with this statement.	•				
	Total f	e reporting entity's security lending program, state the amount of tall a reported on Schedule DL cook adjusted/carrying value of reinvested collateral assets reported on Schedule DL cook adjusted/carrying value of reinvested collateral assets reported.	., Parts 1 and 2:	date:		\$	4,987,913 4,987,913
16.3	Total	payable for securities lending reported on the liability page:				\$	4,987,913
17.	offices	ding items in Schedule E-Part 3-Special Deposits, real estate, monts, vaults or safety deposit boxes, were all stocks, bonds and other lial agreement with a qualified bank or trust company in accordantical Functions, Custodial or Safekeeping Agreements of the NAIC	securities, owned throughout the cunce with Section 1, III - General Exam	rrent year held nination Consid	pursuant to a	ırcing	Yes[X] No[
	17.1	For all agreements that comply with the requirements of the NAIC	C Financial Condition Examiners Har	ndbook, comple	ete the following:		
		1			•	2	
		Name of Custodian(s) JP Morgan Worldwide Securities Services	38	33 Madison Av	Custo enue, New York, N'	dian Address Y 10179	_
		For all agreements that do not comply with the requirements of th location and a complete explanation:	l .				
		1	2			3	
		Name(s)	Location(s	s)		Complete Explar	nation(s)
	17.3	Have there been any changes, including name changes, in the cu	ustodian(s) identified in 17.1 during t	he current qua	rter?		Yes[] No[X
		If yes, give full and complete information relating thereto:	actionality) identified in 17.1 during to	no ourront qua	1101 :		100[] 110[X
	17.4	1	2		3		4
					Date of		
		Old Custodian	New Custodian		Change	Rea	ason
		Investment management – Identify all investment advisors, invest of the reporting entity. For assets that are managed internally by securities"].					
			1				2
		Name of F Sanjay Chawla, SVP, Chief Investment Officer	irm or Individual			Affili	iation
		Daniel Richards, VP, Portfolio Mgr Fixed Income					1
		Scott Anthony, VP, Sector Portfolio Mgr Fixed Income					I
		17.5097 For those firms/individuals listed in the table for Ques manage more than 10% of the reporting entity's asset	stion 17.5, do any firms/individuals ur ets?	naffiliated with	the reporting entity	(i.e., designated with a	''U") Yes [] No [
		17.5098 For firms/individuals unaffiliated with the reporting en management aggregate to more than 50% of the rep		d in the table fo	or Question 17.5, do	es the total assets und	der Yes[] No[

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

		, , , , , , , , , , , , , , , , , , , ,		
1	2	3	4	5
Central Registration Depository				Investment Management
Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Agreement (IMA) Filed

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes[X] No[]

18.2 If no, list exceptions:

- By self-designating 5Gl securities, the reporting entity is certifying the following elements for each self-designated 5*Gl security:
 - Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

 - Issuer or obligor is current on all contracted interest and principal payments.

 The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes [] No [X]

- By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
 - The security was purchased prior to January 1, 2018.
 - b.
 - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

 The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. Has the reporting entity self-designated PLGI securities?

Yes[] No[X]

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

GENERAL INTERROGATORIES (continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	If yes, attach an explanation.		
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? If yes, attach an explanation.	Yes[]	No [X]

- 3.1 Have any of the reporting entity's primary reinsurance contracts been canceled?

 Yes [] No [X]
- 3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?

Yes[] No[X]

Yes[] No[X] N/A[]

4.2 If yes, complete the following schedule:

1	2	3		Total D	iscount		Discount Taken During Period						
			4	5	6	7	8	9	10	11			
Line of Business	Maximu m Interest	Disc. Rate	Unpaid Losses	Unpaid LAE	IBNR	Total	Unpaid Losses	Unpaid LAE	IBNR	Total			
	0.000	0.000	0	0	0	0	0	0	0	0			
Total	XXX	XXX	0	0	0	0	0	0	0	0			

5. Operating Percentages:

	5.1	A&H loss percent		0.000%
	5.2	A&H cost containment percent		0.000%
	5.3	A&H expense percent excluding cost containment expenses		0.000%
6.1	Do yo	u act as a custodian for health savings accounts?	Yes[]	No [X]
6.2	If yes,	please provide the amount of custodial funds held as of the reporting date.	\$	0
6.3	Do yo	u act as an administrator for health savings accounts?	Yes[]	No [X]
6.4	If yes,	please provide the amount of funds administered as of the reporting date.	\$	0
7.	Is the	reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X]	No []
7.1	,	does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile reporting entity?	Yes[]	No[]

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

		enowing 7 in New Tremedicio Carrent Tear to Ba				
1	2	3	4	5	6	7
NAIC					Certified	Effective Date of Certified
Company			Domiciliary	Type of	Reinsurer Rating	Reinsurer
Code	ID Number	Name of Reinsurer	Jurisdiction	Reinsurer	(1 through 6)	Rating
U.S. Insurers						
10538	03-0308160	AMERICAN TRIUMVIRATE INSURANCE COMPANY (ATIC)	VT	Unauthorized		
	61-1140366	DRISK INSURANCE INC	UT	Unauthorized		
All Other Insu	ırers					
	AA-3191390	CASTLE HARBOUR INUSRANCE LIMITED	BMU	Unauthorized		
	AA-3770336	HEXAGON INSURANCE COMPANY, LTD	CYM	Unauthorized		

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

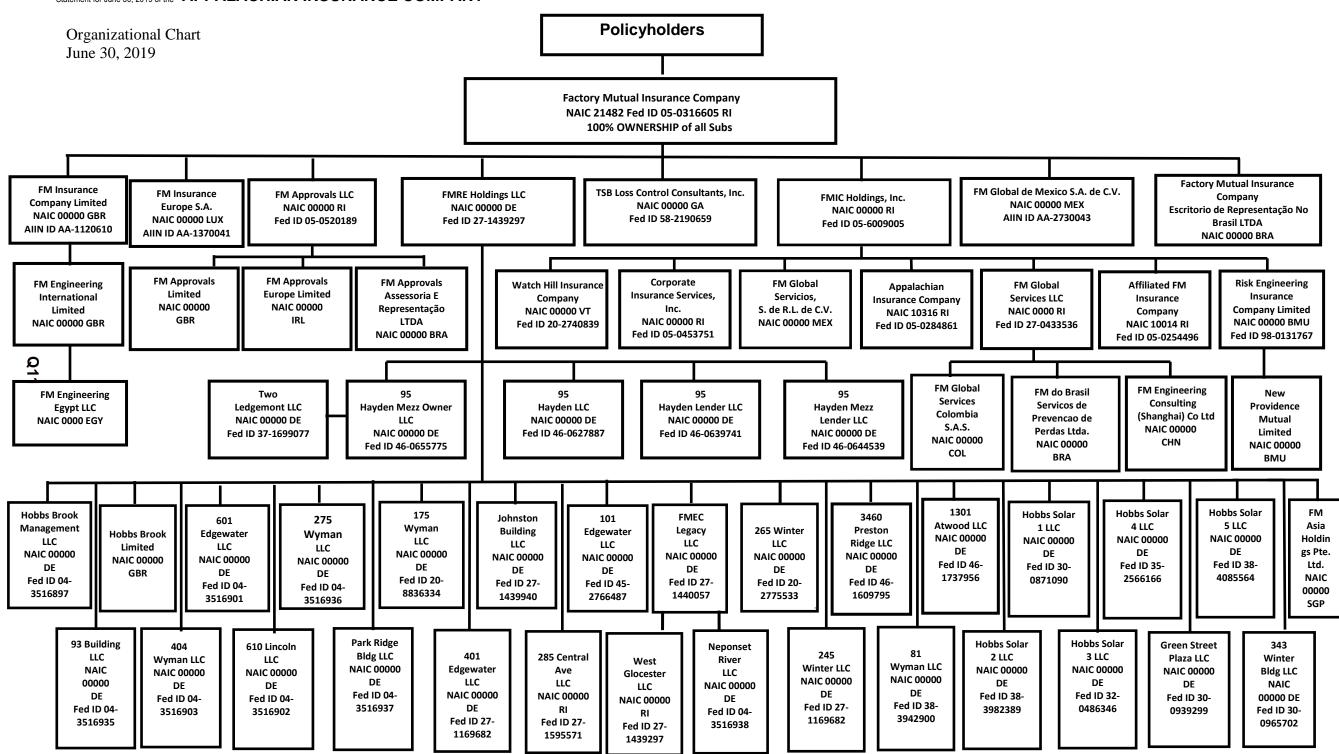
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

Direct Premiums Written

Direct Losses Paid (Deducting Salvage)

	States, Etc.	Active Status (a)	2 Current Year to Date	Prior Year to Date	4 Current Year to Date	Prior Year to Date	6 Current Year to Date	Prior Year to Date
1.	AlabamaAL	E						
2.	AlaskaAK							
3.	ArizonaAZ							
4. -	ArkansasAR							40 000 74
5. 6.	CaliforniaCA ColoradoCO	E			82,484	67,767		19,226,74
o. 7.	ConnecticutCT							
8.	DelawareDE	E						
9.	District of ColumbiaDC	E						
0.	FloridaFL	E					184,742	485,82
1.	GeorgiaGA	E					34,137,002	33,654,72
2.	HawaiiHI							
3.	ldahoID	E						
4. -	IllinoisIL	E					833	1,49
5.	IndianaIN	E						
6. 7.	IowaKS							
7. 8.	KentuckyKY							
9.	LouisianaLA						151	39
0.		E						
1.	MarylandMD							
2.	MassachusettsMA						4	1
3.	MichiganMI							1
4.	MinnesotaMN						7	
25.	MississippiMS						4	1
26.	MissouriMO	E					20,482,134	20,192,78
7.	MontanaMT	E						
8.	NebraskaNE	E						
9.	NevadaNV							
0.	New HampshireNH							
1.	New JerseyNJ	E						
2.	New MexicoNM	E						
	New YorkNY				11,695	13,410	8,772,213	22,622,87
4. 5.	North CarolinaNC North DakotaND	E						
6.	OhioOH	E						
i7.	OklahomaOK							
8.	OregonOR							
9.	PennsylvaniaPA						755	76
0.	Rhode IslandRI						2,958	3,16
1.	South CarolinaSC	E						
2.	South DakotaSD	E						
3.	TennesseeTN							
4.	TexasTX	E					12,472	18,62
5.	UtahUT	E						
6.	VermontVT	E						
	VirginiaVA							
8.	WashingtonWA				10,103	(1,567)		13,450,20
19. :n	West VirginiaWV						1,000	1,00
i0.	WisconsinWI WyomingWY							
51. 52.	WyomingWY American SamoaAS							
i2. i3.	GuamGU							
i3. i4.	Puerto RicoPR							
5.	US Virgin IslandsVI							
56.	Northern Mariana IslandsMP							
	CanadaCAN	E						
8.	Aggregate Other AlienOT		0	0	0	0	0	
9.	Totals	XXX	0	0				109,658,62
				DETAILS OF V	VRITE-INS			
001.		XXX						
002.		XXX						
	Common of remaining units inc	XXX						
1 98.	Summary of remaining write-ins	XXX	^	0	0	0	0	
999.	for Line 58 from overflow page Totals (Lines 58001 thru 58003+	۸۸۸	0	0	U		U	
	Line 58998) (Line 58 above)	XXX	0	0	0	0	0	
a)	Active Status Count							
	ensed or Chartered - Licensed insurance			1			<u>-</u>	
Elig	ible - Reporting entities eligible or appro other than their state of domicile - Sec	ved to write DSLI)	surplus lines in the state	54		ed or accredited reinsurer e - Not allowed to write busin	ness in the state	
	mestic Surplus Lines Insurer (DSLI) - Re			U-T				



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

						PART 1A - DETAIL OF INSUI	RANCE	HOLDIN	IG COMPANY SYSTEM				
1	2	3 NAIC	4	5 6	7 Name of Securities Exchange if Publicly Traded	8 Names of	9	10 Relationship	11	Type of Control (Ownership Board, Management,	13 If Control is Ownership	14	ls an SCA Filing
Grou		Company		Federal	(U.S. or	Parent, Subsidiaries		to Reporting		Attorney-in-Fact,	Provide	Ultimate Controlling	Required?
Cod		Code	Number	RSSD CIK	International	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N) *
006	hbers Factory Mutual Insurance Company & its Affiliates	21482	05-0316605.			Factory Mistral Incurence Company	RI	UIP					N
1						Factory Mutual Insurance Company			EMIC Haldiana Inc	O	400.000	Factor Matallan and Comment	
006	' '	10014	05-0254496.	· ·····		Affiliated FM Insurance Company	RI	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
006	' '	10316	05-0284861.	· ·····		Appalachian Insurance Company	RI	RE	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
0000	' '	00000	AA-1120610			FM Insurance Company Limited	GBR	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	
0000	' '	00000	98-0131767.	· ·····		Risk Engineering Insurance Company Limited	BMU	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	AA-1370041			FM Insurance Europe S.A	LUX	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	AA-2730043			FM Global de Mexico S.A. de C.V	MEX	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	
000	1 '	00000	20-2740839.			Watch Hill Insurance Company	VT	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	05-0453751.			Corporate Insurance Services, Inc	RI	NIA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
000	Factory Mutual Insurance Company & its Affiliates	00000				New Providence Mutual Limited	BMU	IA	Risk Engineering Insurance Company Limited	Ownership	100.000	Factory Mutual Insurance Company.	N
000	Factory Mutual Insurance Company & its Affiliates	00000				Factory Mutual Insurance Company - Escritorio de Representação No Brasil LTDA.	BRA	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	Y
_ 000	Factory Mutual Insurance Company & its Affiliates	00000	05-0520189.	.		FM Approvals LLC	RI	NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	N
2	Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering International Limited	GBR	NIA	FM Insurance Company Limited	Ownership	100.000	Factory Mutual Insurance Company.	
万 ₀₀₀	Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering Consulting (Shanghai) Co. Ltd	CHN	NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000				FM Approvals Limited	GBR	NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000				FM Approvals Assessoria E Representação LTDA	BRA	NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	27-1439297.	.		FMRE Holdings LLC	DE	NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	58-2190659.	.		TSB Loss Control Consultants, Inc	GA	NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	05-6009005.	.		FMIC Holdings. Inc	RI	UDP	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company.	Y
000	' '	00000				FM Global Servicios. S.de R.L. de C.V	MEX	NIA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	27-0433536.			FM Global Services LLC	RI	NIA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000				FM do Brasil Servicos de Prevencao de Perdas LTDA	BRA	NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	04-3516902.			610 Lincoln LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	04-3516903.			404 Wyman LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	04-3516936.			275 Wyman LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	20-8836334.			175 Wyman LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	04-3516937.			Park Ridge Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	04-3516935.			93 Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	, , ,	00000	20-2775533.			265 Winter LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	27-1169682.	.		245 Winter LLC	DE	NIA	265 Winter LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	27-1103002.	.		FMEC Legacy LLC.	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	04-3516938.			Neponset River LLC	DE	NIA	FMEC Legacy LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000	' '	00000	27-1439297.	.		West Glocester LLC	RI	NIA	FMEC Legacy LLC	Ownership	100.000	Factory Mutual Insurance Company.	
000		00000	04-3516901.	.		601 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
	Factory Mutual Insurance Company & its Affiliates	00000	27-1595571.	.		285 Central Avenue, LLC	RI	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company.	
1000	Tractory winthan insurance Company & its Affiliates	00000	Z1-1090011.	.		200 Ochiliai Avenue, LLO	r\l	INI/A	FINITE HUIUIIIYS LLG	- Ownership	100.000	ir actory iviutual insurance company.	IV

Q 12

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

						FAINT IA - DETAIL OF INSUI	VIIVOL	I IOLDII						
	1 2	3	4	5	6 7 Name of Securities	8	9	10	11	12 Type of Control	13	14	15	16
					Exchange					(Ownership			Is an	
					if Publicly					Board,	If Control is		SCA	
Gr	oup Group	NAIC Company	ID	Federal	Traded (U.S. or	Names of Parent. Subsidiaries		Relationship to Reporting		Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	,
	ode Name	Code	Number		CIK International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
00	00 Factory Mutual Insurance Company & its Affiliates	00000	04-3516897			Hobbs Brook Management LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000				Hobbs Brook Limited	GBR	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	45-2766487			101 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	27-1169682			401 Edgewater LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	27-1439940			Johnston Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000				FM Global Services Colombia S.A.S	COL	NIA	FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	37-1699077			Two Ledgemont LLC	DE	NIA	95 Hayden Mezz Owner LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-0627887			95 Hayden LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-0639741			95 Hayden Lender LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-0655775			95 Hayden Mezz Owner LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-0644539			95 Hayden Mezz Lender LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-1609795			3460 Preston Ridge, LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	46-1737956			1301 Atwood LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
$\mathbf{Q} _{00}$	00 Factory Mutual Insurance Company & its Affiliates	00000	38-3942900			81 Wyman LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
		00000	30-0871090			Hobbs Solar 1 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
<u> </u>	00 Factory Mutual Insurance Company & its Affiliates	00000	38-3982389			Hobbs Solar 2 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	32-0486346			Hobbs Solar 3 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000				FM Asia Holdings Pte. Ltd	SGP	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	30-0939299			Green Street Plaza LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	35-2566166			Hobbs Solar 4 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering Egypt LLC	EGY	NIA	FM Engineering International Limted	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	30-0965702			343 WInter Bldg LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000				FM Approvals Europe Limited	IRL	NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
00	00 Factory Mutual Insurance Company & its Affiliates	00000	38-4085564			Hobbs Solar 5 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	

Pool Participants: Factory Mutual Insurance Company (86%), Affiliated FM Insurance Company (12%), and Appalachian Insurance Company (2%).

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY PART 1 - LOSS EXPERIENCE

			Current Year to Date		1
	Lines of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
1.	Fire			0.000 .	
	Allied lines			0.000 .	
3.	Farmowners multiple peril			0.000 .	
4.	Homeowners multiple peril			0.000 .	
5.	Commercial multiple peril			0.000 .	
6.	Mortgage guaranty			0.000	
8.	Ocean marine			0.000	
9.	Inland marine			0.000	
10.	Financial guaranty			0.000	
11.1.	Medical professional liability - occurrence			0.000 .	
11.2.	Medical professional liability - claims-made			0.000 .	
12.	Earthquake			0.000 .	
	Group accident and health			0.000	
14.	Credit accident and health			0.000	
15.	Other accident and health			0.000	
	Workers' compensation			0.000	
17.1	Other liability-occurrence			0.000	
17.2	Other liability-claims made			0.000	
17.3	Excess workers' compensation			0.000	
18.1	Products liability-occurrence			0.000	
18.2	Products liability-claims made			0.000	
	19.2 Private passenger auto liability			0.000	
	19.4 Commercial auto liability			0.000	
	Auto physical damage			0.000	
	Aircraft (all perils)			0.000	
	Fidelity			0.000	
	Surety			0.000	
	Burglary and theft			0.000	
	Boiler and machinery			0.000	
	Credit			0.000	
	International			0.000	
-	Warranty			0.000	
	Reinsurance-nonproportional assumed property		XXX	XXX	XXX
	Reinsurance-nonproportional assumed liability		XXX	XXX	XXX
	Reinsurance-nonproportional assumed financial lines		XXX	XXX	XXX
34	Aggregate write-ins for other lines of business	0		0.000	
	Totals.		0	0.000	
JJ.	TAMO	DETAILS OF WRITE-INS			
3401.				0.000 .	
3402				0.000	
				0.000	
	Sum. of remaining write-ins for Line 34 from overflow page		0		XXX
	Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		0		

PART 2 - DIR	RECT PREMIUMS WRI	TTEN	
Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire			
2. Allied lines			
Farmowners multiple peril			
4. Homeowners multiple peril			
Commercial multiple peril			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine			
10. Financial guaranty			
11.1 Medical professional liability - occurrence			
11.2 Medical professional liability - claims made			
12. Earthquake			
13. Group accident and health			
14. Credit accident and health			
15. Other accident and health			
16. Workers' compensation			
17.1 Other liability-occurrence			
17.2 Other liability-claims made			
17.3 Excess workers' compensation	\.		
18.1 Products liability-occurrence			
18.2 Products liability-claims made			
19.1 19.2 Private passenger auto liability			
19.3 19.4 Commercial auto liability			
21. Auto physical damage			
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft			
27. Boiler and machinery			
28. Credit			
29. International.			
30. Warranty			
31. Reinsurance-nonproportional assumed property		XXX	XXX
32. Reinsurance-nonproportional assumed liability	XXXXXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines		XXX	XXX
34. Aggregate write-ins for other lines of business			n
35. Totals		0	0
VV. TVILIIV.		0	0
3401	DETAILS OF WRITE-INS		
3402			
7 7 -			
3403			
3498. Sum. of remaining write-ins for Line 34 from overflow page		0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		0	0

PART 3 (000 omitted)

				L	OSS AND LOSS A	ADJUSTMENT E	XPENSE RESER	VES SCHEDULE					
	1	2	3	4	5	6	7 Q.S. Date Known	8 Q.S. Date Known	9	10	11 Prior Year-End Known		13 Prior Year-End
Vanna in Milaiala	Prior Year-End Known Case	Prior Year-End IBNR	Total Prior Year-End	2019 Loss and LAE	2019 Loss and LAE	Total 2019	Case Loss and LAE Reserves on	Case Loss and LAE Reserves on Claims	Q.S. Date IBNR	Total Q.S. Loss and LAE	Case Loss and LAE Reserves Developed	IBNR Loss and LAE Reserves Developed	Total Loss and LAE Reserve
Years in Which Losses	Loss and LAE	Loss and LAE	Loss and LAE Reserves	Payments on Claims Reported as of Prior	Payments on Claims Unreported as of	Loss and LAE Payments	Open as of Prior	Reported or Reopened Subsequent to	Loss and LAE	Reserves	(Savings)/Deficiency (Cols. 4 + 7	(Savings)/Deficiency (Cols. 5 + 8 + 9	Developed (Savings)/Deficiency
Occurred	Reserves	Reserves	(Cols. 1 + 2)	Year-End	Prior Year-End	(Cols. 4 + 5)	Year-End	Prior Year-End	Reserves	(Cols. 7 + 8 + 9)	minus Col. 1)	minus Col. 2)	(Cols. 11 + 12)
1. 2016 + Prior	7,526	60,894	68,419	115		115	11,190	10	57,104	68,304	3,779	(3,780)	(0)
2. 2017			0			0				0	0	0	0
3. Subtotals													
2017 + Prior	7,526	60,894	68,419	115	0	115	11,190	10	57,104	68,304	3,779	(3,780)	(0)
4. 2018			0			0				0	0	0	0
5. Subtotals													
2018 + Prior	7,526	60,894	68,419	115	0	115	11,190	10	57,104	68,304	3,779	(3,780)	(0)
6. 2019	XXX	XXX	XXX	XXX	18,364	18,364	XXX			0	XXX	XXX	XXX
7. Totals		60,894	68,419	115	18,364	18,479	11,190	10	57,104	68,304	3,779	(3,780)	(0)
		•		I		· ·		<u> </u>		· · · · · · · · · · · · · · · · · · ·			
Prior Year- End's Surplus											Col. 11, Line 7 As % of Col. 1,	Col. 12, Line 7 As % of Col. 2,	Col. 13, Line 7 As % of Col. 3,
As Regards Policyholders	187,376										Line 7	Line 7	Line 7
												0 (0.0)0/	0.000
											150.2 %	2(6.2)%	3(0.0)%

Col. 13, Line 7 Line 8 4.(0.0)%

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

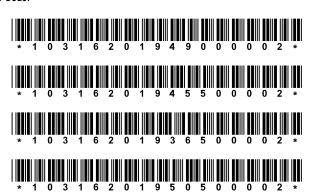
		•
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Response

Explanation:

- 1. The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.

Bar Code:



Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY Overflow Page for Write-Ins

Additional Write-ins for Liabilities:

	1 Current	2 December 31,
	Statement Date	Prior Year
2904.		
2905.		
2997. Summary of remaining write-ins for Line 29	0	0

Additional	Write-ins	for L	iabilities:
------------	-----------	-------	-------------

Additional Write his for Elabilities.		
	1	2
	Current	December 31,
	Statement Date	Prior Year
3204.		
3205.		
3297. Summary of remaining write-ins for Line 32	0	0

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE A - VERIFICATION

Real Estate

	Tour Estate		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.			
	2.1 Actual cost at time of acquisition		
	2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition Current year change in encumbrances		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other-than-temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	Wortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1. Bo	ook value/recorded investment excluding accrued interest, December 31 of prior year	0	
2. Co	ost of acquired:		
2.	1 Actual cost at time of acquisition		
2.2	2 Additional investment made after acquisition		
3. Ca	apitalized deferred interest and other		
4. Ac	ccrual of discount		
5. Ur	apitalized deferred interest and other		
6. To	otal gain (loss) on disposals		
7. De	educt amounts received on disposals		
8. De	educt amortization of premium and mortgage interest points and commitment fees		
9. To	otal foreign exchange change in book value/recorded investment excluding accrued interest		
10. De	educt current year's other-than-temporary impairment recognized		
11. Bo	ook value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. To	otal valuation allowance		
	ubtotal (Line 11 plus Line 12)		0
	educt total nonadmitted amounts		
15. Sta	atement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-reini invested Assets		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition. Capitalized deferred interest and other. Accrual of discount.		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amounts received on disposals Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	209,197,728	220,761,238
2.	Cost of bonds and stocks acquired	21,580,726	14,779,418
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	4,914	(4,914)
5.	Total gain (loss) on disposals	(252,430)	(86,877)
6.	Deduct consideration for bonds and stocks disposed of		
7.	Deduct amortization of premium	103,059	315,748
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		27,240
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	204,690,303	209,197,728
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	204,690,303	209,197,728

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

		1	2	3	4	5	6	7	8
		Book/Adjusted Carrying	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying	Book/Adjusted Carrying	Book/Adjusted Carrying	Book/Adjusted Carrying
		Value Beginning	During	During	During	Value End of	Value End of	Value End of	Value December 31
	NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
	BONDS								
1	NAIC 1 (a)	188,397,980	4,785,738	6,746,774	(2,162,415)	188,397,981	184,274,529		191,293,230
2	NAIC 2 (a)	16,270,324	1,998,937	2,496,970	2,143,483	16,270,324	17,915,774		14,409,448
3	NAIC 3 (a)						0		995,050
4	NAIC 4 (a)						0		
5	NAIC 5 (a)						0		
6	NAIC 6 (a)						0		
. /	Total Bonds	204,668,304	6,784,675	9,243,744	(18,932)	204,668,305	202,190,303	0	206,697,728
	PREFERRED STOCK								
8	NAIC 1	2,500,000				2,500,000	2,500,000		2,500,000
9	NAIC 2						0		
10	. NAIC 3						0		
11	. NAIC 4						0		
	. NAIC 5						0		
13	. NAIC 6						0		
14	. Total Preferred Stock	2,500,000	0	0	0	2,500,000	2,500,000	0	2,500,000
15	. Total Bonds and Preferred Stock	207,168,304	6,784,675	9,243,744	(18,932)	207,168,305	204,690,303	0	209,197,728

⁽a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$........0; NAIC 2 \$.......0; NAIC 3 \$........0; NAIC 5 \$........0.

Sch. DA - Pt. 1 NONE

Sch. DA - Verification NONE

Sch. DB - Pt. A - Verification NONE

Sch. DB - Pt. B - Verification NONE

Sch. DB - Pt. C - Sn. 1 NONE

Sch. DB - Pt. C - Sn. 2 NONE

Sch. DB - Verification NONE

QSI03, QSI04, QSI05, QSI06, QSI07

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

Casil Equivalents										
	1 Year To Date	2 Prior Year Ended December 31								
	Year To Date	December 31								
Book/adjusted carrying value, December 31 of prior year	41,327,204	78,044,772								
Cost of cash equivalents acquired	483,494	1,020,898								
Accrual of discount										
Unrealized valuation increase (decrease)	15,609	7,052								
5. Total gain (loss) on disposals	470	(2,999)								
Deduct consideration received on disposals	5,000,000	37,742,519								
7. Deduct amortization of premium										
Total foreign exchange change in book/ adjusted carrying value										
Deduct current year's other-than-temporary impairment recognized										
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	36,826,777	41,327,204								
11. Deduct total nonadmitted amounts										
12. Statement value at end of current period (Line 10 minus Line 11)	36,826,777	41,327,204								

Sch. A Pt. 2 NONE

Sch. A Pt. 3 NONE

Sch. B - Pt. 2 NONE

Sch. B - Pt. 3 NONE

Sch. BA - Pt. 2 NONE

Sch. BA - Pt. 3 NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

			onowing an Long Torri Borido and Otooko No don't	B Baring Garront Quartor				
1	2	3 4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign Date Acqu	ed Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value		NAIC Designation and Administrative symbol/Market Indicator (a)
Bonds - U.S. Governme	ent							
912828 6T 2	UNITED STATES TREAS	05/31/2019	JP MORGAN		4,785,738	4,700,000	5,763 11	FE
0599999. Total -	Bonds - U.S. Government				4,785,738	4,700,000	5,763	XXX
Bonds - Industrial and	Miscellaneous							
00206R HP 0	AT & T INC		EXCHANGE		1,998,937	1,940,000	2	FE
3899999. Total -	Bonds - Industrial and Miscellaneous				1,998,937	1,940,000	0	XXX
8399997. Total -	Bonds - Part 3				6,784,675	6,640,000	5,763	XXX
8399999. Total -	Bonds				6,784,675	6,640,000	5,763	XXX
9999999. Total -	Bonds, Preferred and Common Stocks				6,784,675	XXX	5,763	XXX

⁽a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.............0.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4 5	6	7	8	9	10		Change in B	ook/Adiusted (Carrying Value		16	17	18	19	20	21	22
	_	[]				1	1		11	12	13	14	15	1						1
							ĺ													
																				NAIC
		F									Current							Bond		Designation
		0									Year's		T					Interest /	0	and Admini-
		r						Prior Year	Unrealized Valuation	Current Year's	Other-Than- Temporary	Total Change	Total Foreign Exchange	Book/Adjusted	Foreign Exchange	Realized	Total Gain	Stock Dividends	Stated Contractual	strative Symbol/
		a l	Disposal	Number of				Book/Adjusted	Increase	(Amortization)	Impairment	in B./A.C.V.	Change in	Carrying Value at			(Loss) on	Received	Maturity	Market
CUSIP Iden	ntification Description	n n	Date Name of Purchaser	Shares of Stock	Consideration	Par Value	Actual Cost	Carrying Value	(Decrease)	/ Accretion	Recognized	(11+12-13)	B./A.C.V.		on Disposal		Disposal	During Year	Date	Indicator (a)
Bonds - U.	S. Government																			
36179M	2T 6 GNMA PASS-THRU M SINGLE I		/01/2019. MORTGAGE PAYDOWN		178,524	178,524	194,702	178,924		(401)		(401)		178,524			0	3,543	02/20/2043.	1
36200Q	2T 0 GOVT NATL MTGE ASSN		/01/2019. MORTGAGE PAYDOWN		380	380	389	381				0		380			0	11	02/15/2032.	1
912828	QN 3 UNITED STATES TREAS		/31/2019. WELLS FARGO		4,594,746	4,500,000	4,736,074	4,562,648		(10,874)		(10,874)		4,551,774		42,972	42,972	77,573	05/15/2021.	1FE
0599999.	Total - Bonds - U.S. Government				4,773,650	4,678,904	4,931,165	4,741,953	0	(11,275)	0	(11,275)	0	4,730,678	0	42,972	42,972	81,127	XXX	XXX
Bonds - U.S	S. Special Revenue and Special Assessm	ent																		
31296S	M5 2 FHLMC		/01/2019. MORTGAGE PAYDOWN		2,758	2,758	2,857	2,760		(2)		(2)		2,758			0	69	01/01/2034.	1FE
31297T	WF 6 FHLMC PC		/01/2019. MORTGAGE PAYDOWN		4,000	4,000	3,824	3,994		6		6		4,000			0	83	09/01/2035.	1FE
31411A	JG 1 FEDERAL NATL MG		/01/2019. VARIOUS		1,591	1,591	1,601	1,591				0		1,591			0	40	11/01/2036.	1FE
31419A	DS 3 FNMA PASS-THRU LNG 30 Y		/01/2019. VARIOUS		7,747	7,747	8,440	7,776		(29)		(29)		7,747			0	186	09/01/2039.	1FE
3199999.	Total - Bonds - U.S. Special Revenue	and Special Asse	essments.		16,096	16,096	16,722	16,121	0	(25)	0	(25)	0	16,096	0	0	0	378	XXX	XXX
Bonds - Inc	dustrial and Miscellaneous																			
655844	BC 1 NORFOLK SOUTHERN CORP		/15/2019. MATURITY		500,000	500,000	498,750	499,927		73		73		500,000			0	14,750	06/15/2019.	2FE
693476	BF 9 PNC FUNDING CORP		/10/2019. MATURITY		2,000,000	2,000,000	1,995,820	1,999,752		248		248		2,000,000			0	67,000	06/10/2019.	1FE
887317	AR 6 TIME WARNER INC		/05/2019. EXCHANGE		1,998,936	2,000,000	1,993,980	1,996,711		259		259		1,996,970		1,966	1,966		12/15/2023.	2FE
887317 3899999. 8399997.	Total - Bonds - Industrial and Miscella	neous			4,498,936	4,500,000	4,488,550	4,496,390	0	580	0	580	0	4,496,970	0	1,966	1,966	81,750	XXX	XXX
8399997.	Total - Bonds - Part 4				9,288,682	9,195,000	9,436,437	9,254,464	0	(10,720)	0	(10,720)	0	9,243,744	0	44,938	44,938	163,255	XXX	XXX
8399999.	Total - Bonds				9,288,682	9,195,000	9,436,437	9,254,464	0	(10,720)	0	(10,720)	0	9,243,744	0	44,938	44,938	163,255	XXX	XXX
9999999.	Total - Bonds, Preferred and Commor	Stocks			9,288,682	XXX	9,436,437	9,254,464	0	(10,720)	0	(10,720)	0	9,243,744	0	44.938	44,938	163,255	XXX	XXX

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:0.

Sch. DB - Pt. A - Sn. 1 NONE

Sch. DB - Pt. B - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 2 NONE

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets reported in aggregate on one Line 10 of the Assets page and not included on Schedules A. B. BA. D. DB and E.)

	(26)	Juli	ies lending collateral assets reported in aggregate on one Line. To of the Assets p	age and	not included	on Schedules A,	D, DA, D, DD allu	⊏.)
1	1		2	3	4	5	6	7
					NAIC Designation			
					and			
					Administrative			
					Symbol / Market		Book/Adjusted	Maturity
CUSIP Ide	entificati	ion	Description	Code	Indicator	Fair Value	Carrying Value	Date
Cash Equiva	alents (Sche	dule E Part 2 Type)					
000000	00	0	BOFA SECURITIES, INC	C		1,245,000	1,245,000	06/21/2019
000000	00		DEUTSCHE BANK SECURITIES INC	C		1,232,913	1,232,913	06/21/2019
000000	00	0	HSBC SECURITIES,INC	C		1,245,000	1,245,000	06/21/2019
000000	00	0	MIZUHO SECURITIES USA INC	C		10,000	10,000	06/21/2019
000000	00	0	NATIXIS NEW YORK BRANCH	C		10,000	10,000	06/21/2019
000000	00	0	SOCIETE GENERALE NY BRANCH	C		1,245,000	1,245,000	06/21/2019
9199999.	Total	I - Ca	sh Equivalents (Schedule E Part 2 Type)			4,987,913	4,987,913	XXX
9999999.	Total	ls				4,987,913	4,987,913	XXX
				-	·	·		

General Interrogatories:

- The activity for the year: Fair Value \$.....1,329,743 Book/Adjusted Carrying Value \$.....1,329,743
- Average balance for the year: Fair Value \$....3,198,754 Book/Adjusted Carrying Value \$....3,198,754
- Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
 - NAIC 1: \$....4,987,913 NAIC 2: \$.......0 NAIC 3: \$.......0 NAIC 4: \$.......0 NAIC 5: \$.......0 NAIC 6: \$......0

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

SCHEDULE DL - PART 2 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedules A. B. BA. D. DB and F and not reported in aggregate on Line 10 of the Assets page)

(Securities lending collateral assets included on Schedules A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page).										
1	2	3	4	5	6	7				
			NAIC Designation							
			and							
			Administrative							
			Symbol / Market		Book/Adjusted	Maturity				
CUSIP Identification	Description	Code	Indicator	Fair Value	Carrying Value	Date				

General Interrogatories:

- The activity for the year: Fair Value \$.........0 Book/Adjusted Carrying Value \$........0

 Average balance for the year: Fair Value \$........0 Book/Adjusted Carrying Value \$........0

NONE

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE E - PART 1 - CASH

Month End Depository Balances										
1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9		
			Amount of Interest	Amount of interest Accrued at	6	7	8			
		Rate of		Current Statement						
Depository	Code	Interest	Current Quarter	Date	First Month	Second Month	Third Month	*		
Open Depositories										
JP MORGAN CHASE NEW YORK, NY		0.800	41,110		8,009,536	8,631,777	12,595,633	XXX		
0199998. Deposits in1 depositories that do not exceed the allowable limit										
in any one depository (see Instructions) - Open Depositories	XXX	XXX			(281)	(281)	(541)	XXX		
0199999. Total Open Depositories	XXX	XXX	41,110	0	8,009,255	8,631,496	12,595,092	XXX		
0399999. Total Cash on Deposit	XXX	XXX	41,110	0	8,009,255	8,631,496	12,595,092	XXX		
0599999. Total Cash	XXX	XXX	41,110	0	8,009,255	8,631,496	12,595,092	XXX		

Statement for June 30, 2019 of the APPALACHIAN INSURANCE COMPANY

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
All Other Money Market	t Mutual Funds	, , , ,		<u> </u>				
	LACKROCK LIQUIDITY TEMPFUND INST'L		05/31/2019	2.430		36,826,777		462,985
8699999. Total - Ali Other Money Market Mutual Funds							0	462,985
889999. Total - Cash Equivalents						36,826,777	0	462,985